Approved for use through 7/31/2006 CMS 065 9-0032 U.S. Patert and Trademer's Office; U.S. DEPARTMENT OF COMMERCE

PATE	NT APPLIC	ATION F Submitude	EE DET for Form P	ERMINA TO-875	TION Effects	RECO	RD		•	Appl	cetion or Doc	iol N	umber
APPLICATION AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY					OTHER OR SMALL		
FOR	NUMBE	RFLED	NUME	BEREXIRA	-] .	RATE	(1)	FEE					
BASIC FEE (37 CFR 1 16(0), (b), or (c))	N	A		N/A	7	NA	12/	150.			RATE (4	FEE O
SEARCH FEE (37 CFR 1 16(N. (4. or (m)	N	A .		N/A	┨ .	NA		\$25			 		300.00
EXAMINATION FEE				HIA	\dashv						N/A	_	\$500
OTAL CLAIMS					-	N/A		\$100			N/A	\dashv	\$200
OFR 1 16(1)) IDEPENDENT CLAIMS	1-7	minus 20 •	•		-11	X\$ 25 .		·		OR	X\$50	•	
7 OFR 1 16(h))	1.9	• Caunim			11	X100	\cdot				X200		
PPLICATION SIZE EE 7 OFR 1 16(4))	If the specifisheets of paids \$250 (\$12 additional 50 35 U.S.C. 4	per, the app !5 for small () sheets or f	olication st entity) for e taction the	ze fee due each ereof. See									
ULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1 16(J))					11	+180=	1		7	1	+360+	+	
If the difference in column 1 is less than zero, enter "O" in column 2.					-	TOTAL	T			L.	TOTAL	7	
APPLICAT	TON AS AMI	ENDED - F	PART II									-	
(Co	lumn 1)	(Col	lumn 2)	(Column 3)		SMAL	L EN	TITY	c	R	OTHE SMAL		
10/06 REA	LAIMS MAINING FTER NDMENT	NUM	OUSLY	PRESENT' EXTRA		RATE (S)		ADDI- TIONAL FEE (\$)	7		RATE (\$)		'ADDI- TIONAL
Total (37 CFR 1,14(ii)	Of Min	" 2	0		X	\$ 25	1	<u> </u>	1	\f	\$50 _	†-	FEE (\$)
Independent (37 CFR 1.18(h))	S Min	rs (1 -	,	Tx	100	1		OR	-	200	10	. 50
Application, Size Fee (3	7 CFR 1.16(s))				-		+		OR	1		1	66 ⁶⁰
FIRST PRESENTATION OF	F MULTIPLE DEPE	NDENT CLAIM	(37 CFR 1.	.16(3)	1.	180=			OR	1	360=	\vdash	
						TAL D'L FE F			1		DTAL	2	DOOL
(Colur	ma 1):		3)		~	Otree	<u> </u>		OR	ĄĽ	DD'L FEE		
CLA	IMS	HIGHE	ST	Olumn 3)	_		r		1	_			
REMA AFT AMEND	ER	PREVIOU PAID F	USLY . 6	RESENT EXTRA	R.	ATE (S)	ή	DDI- Onal (\$)		'	RATE (\$)	TI	IDDI- ONAL
Total F CFR 1.18(Q)	Minus	"	=		XS	25	,,,	- 1-/	00	X	50 .		E (3)
dependent CFR 1.18(h))	Minus	T	-		-	00	<u>-</u>		OR	-	00		
oplication Size Fee (37 (CFR 1.16(s))	·							OR ·	屵╩	-	····	
RST PRESENTATION OF A	AULTIPLE DEPEN	DENT CLAIM	(37 CFR 1.16	(O)	+1	80=			OR	+3	360=		
					TOT/	U L FEE			OR	TOT	AL O'L FEE	·	
the entry in column 1 is in the "Highest Number Pre the "Highest Number Previ the "Highest Number Previ	VIOUSIY Paid For Viousiy Paid For	'IN THIS SPA	ACE is less	than 20, enter	or 20".	L				~00			

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments an the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS UDDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.